## 2006 FOR PROFIT CORPORATION REINSTATEMENT

REINSTATE	<b>-</b>				
DOCUMENT # P00000056693					
Entity Name					
H. G. CARTER, INC.				FILED	
		WILLIAM TO SERVICE STATES	nc		
Principal Place of Business Mailin	g Address		06	MR -2 /11 10: 49	
•	POLK CITY RD.		1	•	
	URNDALE, FL 33823		1. 1流行。		
				OTIL NOTE SOLD OTICO BITO DITIO (DÌDO HILDE) IL FODI	
2. Principal Place of Business 0					
2520 Fussell Road East 2520 Fussell Road East				Eti #411 9516; 5119 6119 6110 15120 (1120) 1 (55)	
Suite, Apt. #, etc. Suit	e, Apt. #, etc.		02272006 REIN-P	CR2E098 (11/05)	
City & State / City	& State /	-1 . 0	4. FEI Number	Applied For	
Polk City Florida Polk	CCITY F	10rida	59-3656349	Not Applicable	
7 Country Zip	3868	buntry	5. Certificate of Status Des	ired S8.75 Additional	
6. Name and Address of Current Register			7. Name and Address of	Fee Required	
Name // C O .					
BUSH, GEORGE T			(P.O. Box Number is Not Acce	intable)	
205 AVE K SE WINTER HAVEN, FL 33880			(1 :O. BOX NUMBER IS NOT ACCO	pane	
2520 Fu			TUSSELL ROAD	East	
		City D. IK	1.1	FL 33868	
The above named entity submits this statement for the purr	nose of changing its regis	tered office or registe	ored agent or both in the State		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
2-28-06					
SIGNATURE Signature, typed or printed name of registered agent and titler applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
				11 - COZ 100/0\4\ E G 44	
FILE NOW!!! FEE IS \$300.00				ance with s. 607.193(2)(b), F.S., the in did not receive the prior notice.	
	100	•	ADDITIONS ISLANGES T	O OFFICERS AND DIDECTORS IN 44	
10. OFFICERS AND DIRECTO		TITLE	ADDITIONS/CHANGES I	O OFFICERS AND DIRECTORS IN 11  Change Addition	
NAME CARTER, H.G.				• • •	
		STREET ADDRESS 3	s 2520 Fussell Road East Polk City Fl 33868		
CITY-ST-ZIP AUBURNDALE, FL 33823			KCHY PI 332		
TITLE NAME		TITLE , NAME		↑ 1 Change ☐ Addition	
STREET ADDRESS		STREET ADDRESS	*		
CITY-ST-ZIP		CITY-ST-ZIP		12 104	
TUTLE		TITLE	-1	Change Addition	
NAME STREET ADDRESS		NAME STREET ADDRESS		. / ()(a	
CITY-ST-ZIP		CITY-ST-ZIP	LACE STEERE	D-UY	
TITLE		TITLE & WASHINGTON	well of the second	Change Addition	
NAME, -		NAME			
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	100068 03/20/06010	3109711 24015 **150.00	
TITLE		TITLE	03/ 20/ 00010	Change Addition	
NAME		NAME			
STREET ADDRESS		STREET ADDRESS	100055	3 <b>109711</b> 24014 **150.00	
CITY-ST-ZIP		CITY-ST-ZIP	03/20/00==010		
TITLE	_ 55.5.5	TITLE NAME		☐ Change ☐ Addition	
NAME STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information					
indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if					
changed, or on an attachment with an address, with all other like empowered.					
changed, or on an attachment with an address, with all o	1 1		A	4	
SIGNATURE: How SIGNATURE AND TYPED OR PRINTED NO.	d h		2-28-0	Daylime Phone #	